FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600003483

OUTPUT TECHNOLOGIES EASTERN REGION, INC.

Principal Place	of Business	Mailing Address									
7847 NW 62ND	ST	333 W 11TH ST									
MIAMI FL 33166		5TH FLR					DO NOT WRITE IN THIS SPACE				
		US CITY MO 64105	KANSAS CITY MO 64105				3. Date incorporated or Qualified				
		03				Ι,	07/08/1996				
	(0)	2a. Mailing Address					4. FEI Number			applied For	
— '	ace of Business	— ·	¬				06-1257029		-	ot Applicable	
Suite, Apt.	# ata	Suite, Apt. #, etc.			+	00 1231029			Additional		
	#, etc.	27			1	5. Certifcate of Status Desired		+ - · · · -	Required		
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be		
_ `		28			'	Trust Fund Contribution		•	t to Fees		
Zip Country		Zip Country				8. This corporation owes the curr	ent vear Inta	naible			
24	25 29 30			•			Personal Property Tax.		Yes	□No	
241	9. Name and Address of Current	, l	- T			10	0. Name and Address of New I	Registered A	Agent		
			1	B1	Name						
C T CORPORATION SYSTEM			ļ,	-	Chunch	A -d -d	(P.O. Box Number is Not Accept	abla)			
1200 SOUTH PINE ISLAND ROAD			82 Street Ad			Address	(P.O. Box Number is Not Accept	anie)			
PLANTATION FL 33324			ļ.	B3				******			
								<u> </u>	ion m		
				84	City			FL	85 Zip	Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered											
office or n	egistered agent, or both, in the State of manifer with, and accept the obligat	of Florida. Such change was aut	horized	bv ti	he corpo	oration's	board of directors. I hereby acces	pt the appoir	ntment as i	registered	
	in familiar with, and accept the obligat	iona or, addition our loods, Florid	- Cuio							-	
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE: F	Registered A	gent :	signature re	required whe	n reinstating)	DATE			
12.	OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OF	FICERS AN	_		
TITLE	PD	☐ DELETE	1.1 TITLE						Change	Addition	
NAME	WILLOUGHBY, DAVID W		1.2 NAM	Œ							
STREET ADDRESS	60 PRESTIGE PARK RD		1.3 STREET AD		NODRESS						
CITY-ST-ZIP	EAST HARTFORD CT		1.4 CITY-		ZIP	ļ					
TITLE	V	☐ DELETE	2.1 TITLE				•		Change	Addition	
NAME	O'CONNOR, BERNARD K		2.2 NAME			1					
STREET ADDRESS	60 PRESTIGE PARK RD		2.3 STREE		ADDRESS						
CITY-ST-ZIP			2. 4 CIT	2.4 CITY-ST-ZIP		ļ ·					
TITLE			3.1 TITL	3.1 TITLE					Change	Addition	
NAME	MOORE, THOMAS W			Æ							
STREET ADDRESS	60 Prestige PK RD	3.3 \$		EET A	address	1					
CITY-ST-ZIP			3.4. CIT	Y-ST	-ZIP	<u> </u>					
TITLE	TD □ DELETE 4.11		4.1 TITL	4.1 TITLE					☐ Change	Addition	
NAME	HAGER, KENNETH V			4. 2 NAME							
STREET ADDRESS			4.3 STR	EET/	ADDRESS	•					
CITY-ST-ZIP	KANSAS CITY MO			4.4 CITY-ST-ZIP		ļ					
TITLE	•			5.1 TITLE				,	Change	Addition	
NAME	SCHELLHORN, CHARLES W		5.2 NAM								
STREET ADDRESS				5.3 STREET ADDRESS		1					
CITY-ST-ZIP	KANSAS CITY MO 64108			CITY-ST-ZIP		1					
TITLE	(V	X) DELETE	6.1 TITL			\ V			☐ Change	e ∏ {Addition :	
NAME	HIL, GARET E		6.2 NAM			1	hael Gianoni				
STREET ADDRESS	TADDRESS 322 EIGHTH AVENUE			EET/	address	60	Prestige Park Rd.				

CITY-ST-ZIP

FILED Mar 01, 1999 8:00 am

Secretary of State

03-01-1999 90098 011 ***150.00